

SUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M - G		11/30/99
O.I.P.E. CLASSIFIER			12-595
FORMALITY REVIEW	EAD	60125	12/13/99 4:30 P.M.

INDEX OF CLAIMS

Rejected N Non-elected
 Allowed I Interference
 - (Through numeral) Canceled A Appeal
 Restricted O Objected

Claim	Final	Original	Date
1	/	/	5/3/98
2	/	/	5/3/98
3	/	/	5/3/98
4	/	/	5/3/98
5	/	/	5/3/98
6	/	/	5/3/98
7	/	/	5/3/98
8	/	/	5/3/98
9	/	/	5/3/98
10	/	/	5/3/98
11	/	/	5/3/98
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13	/	/	5/3/98
14	/	/	5/3/98
15	/	/	5/3/98
16	/	/	5/3/98
17	/	/	5/3/98
(18)	0	0	
(19)	0	0	
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23	/	/	
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25	/	/	
26	/	/	
(27)	0	/	/
28	0	/	/
29	0	/	/
30	C	0	0
31	0	0	0
32	C	0	0
33	0	/	/
34	0	/	/
(35)	0	/	/
36	/		
37	/		
(38)	C	/	/
39	0	/	/
40	C	/	/
41	C	/	/
42	C	0	0
43	C	0	0
44	C	/	/
45	C	/	/
46	C	/	/
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

Best Available Copy